

**Exhibit A**  
**Inmate File of Edwin D. Dennis, Jr.**  
**Inmate Booking Sheet**

12/22/2005 15:58:16

LEE COUNTY SHERIFF'S OFFICE  
INMATE BOOKING SHEET

PAGE 1

BOOKING NO: 050000865

INMATE NAME: DENNIS EDWIN DEE II

ALIAS:

ALIAS:

ADDRESS: 2155 #15A CO RD 388

CITY/ST/ZIP: VALLEY, AL 36854

HOME PHONE: 334-756-5612

DOB: 11/27/1972 AGE: 32

PLCE BIRTH: LAGRANGE

STATE: GA

M. STATUS: DIVORCED

RELIGION: CHRISTIAN

GANG ASSOC: NO

SCARS/TATTOOS: TAT BODILY

KNOWN ENEMIES:

REMARKS:

RACE: W SEX: M

HT: 5'11" HAIR: BRO

WT: 170 EYES: BRO

COMPLEX:

SSN: 255-61-2351

DL ST: AL DLN: 01234216

SID:

LOCID: 12908

NEXT OF KIN: MARGARET DENNIS

ADDRESS: CO RD 500

CITY/ST/ZIP: VALLEY, AL 36854

REMARKS:

RELATIONSHIP: MOTHER

PHONE: 334-756-5612

## EMPLOYER INFO

EMPLOYED: N

EMPLOYER NAME:

ADDRESS:

CITY/ST/ZIP:

PHONE: 000-000-0000

## MEDICAL

HANDICAPPED: NEEDS: NO

GLASSES: N SMOKE: Y

MEDICAL NEEDS: N NEEDS:

PHYSICIAN:

PHONE: 000-000-0000

REMARKS:

REMARKS:

REMARKS:

## PROPERTY

CASH: \$01.53

DESCRIPTION:

ADD. PROPERTY: STREET CLOTHES

ADD. PROPERTY: BELT, SILVER RING, 2 KEY HOOPS

ADD. PROPERTY:

BIN NUMBER: 15

VEH IMPOUNDED:

IMPOUND LOT:

REMARKS:

REMARKS:

I HAVE READ THE ABOVE ACCOUNTING OF MY PERSONAL INFORMATION, MEDICAL INFORMATION, MONEY, AND OTHER PROPERTY AND I FIND IT TO BE TRUE AND ACCURATE.

INMATE: Dennis D. Dee DATE: \_\_\_\_\_ TIME: \_\_\_\_\_BOOK OFFICER: D. O. O. DATE: \_\_\_\_\_ TIME: \_\_\_\_\_

02/22/2005 15:58:16 LEE COUNTY SHERIFF'S OFFICE  
INMATE BOOKING SHEET PAGE 2

BOOKING NO: 050000865 INMATE NAME: DENNIS EDWIN DEE II

COURT: ATTORNEY ON REC:  
JUDGE: PHONE: 000-000-0000  
REMARKS:  
REMARKS:

BOOK DATE: 02/22/2005 BOOK TIME: 15:55 BOOK TYPE: NORMAL

ARREST DATE: 02/22/2005 BOOKING OFFICER: BLACK  
ARREST DEPT: LCSO CELL ASSIGNMENT: HC3  
ARREST OFFICER: HALL MEAL CODE: 01 LEE COUNTY  
PROJ. RLSDATE: 00/00/0000 FACILITY: 01 COUNTY JAIL  
SEARCH OFFCR: HALL CLASSIFICATION:  
TYPE SEARCH: WORK RELEASE: N  
INTOX RESULTS:

HOLDS: N  
AGENCY: REASON:  
AGENCY: REASON:  
AGENCY: REASON:  
AGENCY: REASON:

NOTES:  
NOTES:  
NOTES:

**Exhibit B**  
**Inmate File, Inmate Charge Sheet**

02/22/2005 20:39:07 LEE COUNTY SHERIFF'S OFFICE  
INMATE CHARGE SHEET PAGE 1

BOOKING NO: 050000865 INMATE NAME: DENNIS EDWIN DEE II

CHARGE NO: 1 DISPOSITION: OPEN HOLD: N

ALA STATUTE: 13A-12-218 # OF COUNTS: 1  
OFFENSE: UNL MANUF CONT SUB WARRANT #:  
CASE #: 13A-12-218  
BOND AMT: 30,000 FINE: \$0.00  
BAIL AMT:  
INIT APPEAR: 00/00/0000 SENTENCE DATE: 00/00/0000  
RELEASE DTE: 00/00/0000  
ARREST DATE: 02/22/2005 ARST AGENCY: LCSO  
ARST OFFICR: SURRETT/JACKSON COUNTY: LEE  
COURT: CIRCUIT JUDGE:  
DEF ATTORNY: DIST ATTORNEY:  
COMMENTS:  
COMMENTS:  
COMMENTS:

CHARGE NO: 2 DISPOSITION: OPEN HOLD: N

ALA STATUTE: 13A-12-231 # OF COUNTS: 1  
OFFENSE: TRAFFIC METH WARRANT #:  
CASE #: 13A-12-231  
BOND AMT: 25,000 FINE: \$0.00  
BAIL AMT:  
INIT APPEAR: 00/00/0000 SENTENCE DATE: 00/00/0000  
RELEASE DTE: 00/00/0000  
ARREST DATE: 02/22/2005 ARST AGENCY: LCSO  
ARST OFFICR: SURRETT/JACKSON COUNTY: LEE  
COURT: CIRCUIT JUDGE:  
DEF ATTORNY: DIST ATTORNEY:  
COMMENTS:  
COMMENTS:  
COMMENTS:

**Exhibit C**  
**Affidavit of Lieutenant Corey Welch**

IN THE UNITED STATES DISTRICT COURT  
FOR THE MIDDLE DISTRICT OF ALABAMA

EDWIN D. DENNIS, JR.,

Plaintiff,

v.

COREY WELCH, et.al

Defendant.

Civil Action No. 3:05-CV-919-T

AFFIDAVIT OF COREY WELCH

STATE OF ALABAMA

COUNTY OF LEE

BEFORE ME, the undersigned authority and Notary Public in and for said County and State at large, personally appeared COREY WELCH, who being known to me and being by me first duly sworn on oath deposes and says as follows:

1. My name is Corey Welch. I am over the age of nineteen and competent to execute this affidavit.
2. The Lee County Jail employs the following classification system: Pretrial detainees who are awaiting trial on a felony charge are housed in the F wing. Pretrial detainees who are awaiting trial on a misdemeanor charges are housed in D wing. State inmates and violent offenders are housed in the E wing. Once an inmate is sentenced, if there is no available space in the E wing, that inmate will be housed in the F wing until a space becomes available. Jail officials also separate known enemies from one another.
3. The Plaintiff has caused much trouble during his incarceration at the Lee County Jail such as assaulting other inmates. On July 23, 2005, the Plaintiff was housed in the F wing of the

Jail. On that day he assaulted another inmate who was also a pretrial detainee. He was found guilty and was placed in disciplinary segregation in an isolation cell in the E wing. After the Plaintiff served his time in disciplinary segregation, he was placed in another cell in the E wing in order to keep him and the inmate with whom he had assaulted separated.

4. It is the policy of the Lee County Detention Facility to provide prompt medical attention to all inmates upon their request. No inmate is denied medical attention in emergency or non-emergency situations. Inmates may request medical attention via a written inmate request form, which is then submitted to a jailer so that the inmate's name may be placed on a sick call list for the inmate to be seen by the detention facility nurse or physician at their next regularly scheduled sick call visitation. Any verbal request by an inmate for medical attention also results in the inmate's name being placed on the sick call list. In all emergency situations, inmates are transported to the East Alabama Medical Center emergency room.

5. Inmates are never denied necessary medical care or attention.

6. I was never aware of an instance where the Plaintiff fell in the shower. There is no report in the file showing that the Plaintiff ever fell as he alleged.

7. Inmates are provided with shower mats.

8. If a drain in the shower areas of the jail become stopped up, a jail staff member will remedy the situation by using Drain-O in the affected area as soon as he/she is notified.

9. No inmate, including the Plaintiff, is ever subject to arbitrary discipline. No inmate, including the Plaintiff, is ever disciplined as a result of that inmate filing a civil suit against jail officials.

10. Jail staff members have never withheld the Plaintiff's mail or any other inmate's mail.



11. Stamps, envelops, and writing materials are available for purchase at the jail commissary. Indigent inmates are provided with these materials at no cost.

12. The records show that the Plaintiff was provided with free stamped envelops upon his request several times.

13. Inmates are always given reasonable opportunities to utilize the law library.

14. Internal grievance procedures at the Lee County Jail are available to all inmates. It is the policy of the Lee County Sheriff's Department that inmates are permitted to submit grievances and that each grievance will be acted upon. The inmates are given an Inmate Grievance Form to complete and return to a Lee County Jail staff member for any grievances they may have. At no time, however, did the Plaintiff file any grievances concerning any of the claims made in his Complaint. Had such a grievance been filed, it would be in the Plaintiff's inmate file. Upon my review of the file, there is no grievance present. If a grievance was filed, it would have been acted upon accordingly, (that is, whether an investigation was needed or simply a response made to the complaints).

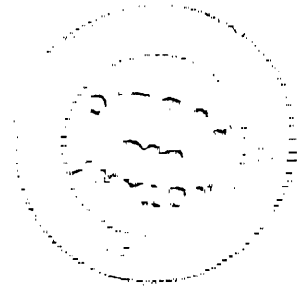
15. I certify and state that the documents from Plaintiff's Inmate File provided to the Court which are attached to the Defendants' Special Report are true and correct copies of inmate records, kept at the Lee County Jail in the regular course of business. I am one of Custodian of these Records.

16. I swear, to the best of my present knowledge and information that the above statements are true, that I am competent to make this affidavit and that the above statements were made by drawing from my personal knowledge of the situation.

Corey D. Welch  
Corey Welch

SWORN TO and SUBSCRIBED before me this 10 day of December, 2005.

Lris D. Bridges  
NOTARY PUBLIC  
My Commission Expires: 2007 COMMISSION EXPIRES FEB. 10, 2007



**Exhibit D**  
**Affidavit of Sergeant Tommy Threat**

**IN THE UNITED STATES DISTRICT COURT  
FOR THE MIDDLE DISTRICT OF ALABAMA**

**EDWIN D. DENNIS, JR.,**

**Plaintiff,**

**v.**

**Civil Action No. 3:05-CV-919-T**

**TOMMY THREAT, et al**

**Defendant.**

**AFFIDAVIT OF TOMMY THREAT**

**STATE OF ALABAMA**

**COUNTY OF LEE**

BEFORE ME, the undersigned authority and Notary Public in and for said County and State at large, personally appeared TOMMY THREAT, who being known to me and being by me first duly sworn on oath deposes and says as follows:

1. My name is Tommy Threat. I am over the age of nineteen and competent to execute this affidavit.
2. The Lee County Jail employs the following classification system: Pretrial detainees who are awaiting trial on a felony charge are housed in the F wing. Pretrial detainees who are awaiting trial on a misdemeanor charges are housed in D wing. State inmates and violent offenders are housed in the E wing. Once an inmate is sentenced, if there is no available space in the E wing, that inmate will be housed in the F wing until a space becomes available. Jail officials also separate known enemies from one another.
3. The Plaintiff has caused much trouble during his incarceration at the Lee County Jail such as assaulting other inmates. On July 23, 2005, the Plaintiff was housed in the F wing of the

Jail. On that day he assaulted another inmate who was also a pretrial detainee. He was found guilty and was placed in disciplinary segregation in an isolation cell in the E wing. After the Plaintiff served his time in disciplinary segregation, he was placed in another cell in the E wing in order to keep him and the inmate with whom he had assaulted separated.

4. It is the policy of the Lee County Detention Facility to provide prompt medical attention to all inmates upon their request. No inmate is denied medical attention in emergency or non-emergency situations. Inmates may request medical attention via a written inmate request form, which is then submitted to a jailer so that the inmate's name may be placed on a sick call list for the inmate to be seen by the detention facility nurse or physician at their next regularly scheduled sick call visitation. Any verbal request by an inmate for medical attention also results in the inmate's name being placed on the sick call list. In all emergency situations, inmates are transported to the East Alabama Medical Center emergency room.

5. Inmates are never denied necessary medical care or attention.

6. I was never aware of an instance where the Plaintiff fell in the shower. There is no report in the file showing that the Plaintiff ever fell as he alleged.

7. Inmates are provided with shower mats.

8. If a drain in the shower areas of the jail become stopped up, a jail staff member will remedy the situation by using Drain-O in the affected area as soon as he/she is notified.

9. No inmate, including the Plaintiff, is ever subject to arbitrary discipline. No inmate, including the Plaintiff, is ever disciplined as a result of that inmate filing a civil suit against jail officials.

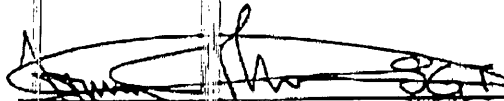
10. Jail staff members have never withheld the Plaintiff's mail or any other inmate's mail.

11. Stamps, envelopes, and writing materials are available for purchase at the jail commissary. Indigent inmates are provided with these materials at no cost.


12. The records show that the Plaintiff was provided with free stamped envelopes upon his request several times.

13. Inmates are always given reasonable opportunities to utilize the law library.

14. I swear, to the best of my present knowledge and information that the above statements are true, that I am competent to make this affidavit and that the above statements were made by drawing from my personal knowledge of the situation.

  
Tommy Threan

SWORN TO and SUBSCRIBED before me this 11<sup>th</sup> day of December, 2005.

  
Chris A. Bridges  
NOTARY PUBLIC  
My Commission Expires FEB. 10, 2007

**Exhibit E**  
**Inmate File, Documents**  
**Regarding Assault on July 23, 2005**

LEE COUNTY DETENTION CENTER  
DISCIPLINARY REPORT

(Form #28)

Inmate Dennis Edwin Deo II Custody Maximum Number OCA# 12908  
 Assignment Cell 7-4 is being charged by Officer Frazier  
 With rule violation 13.21 - 2 assault  
 on or about July 23 1995, Time 14.45 a.m./p.m. Location  
 Circumstances are as follows: you assaulted Mr Cecil Templeton  
while being escorted on such call

MAJOR

MINOR

SERIOUS ☒Notifying Officer: P. J. DeoInmate's Signature Dennis D. DeoSignature of Arresting Officer Officer Frazier 43044Time & Date notified: 7-23-05 5:00pmWitnesses desired: NO ☒ If YES, (List)

Circumstances Investigated By:

Hearing date 7-24-05Time 5:00pmPlea ☒ Guilty ( ) Not GuiltyIf guilty, inmate must affix signature Dennis D. Deo

Committee Findings & Reasons: Inmate Deo is found guilty per his plea  
of guilty and Officer Frazier's testimony

Committee Recommendations: Ten days solitary confinement in cell 9-1, with  
ten days loss of commissary and visitation privileges, no  
restrictions on attorney, clergy or media visits

Witnesses: None neededSignature of Chairman James Deo 4305Signature, Member James DeoSignature, Member James DeoCopy delivered to inmate: Date 7-26-05Action - Date 7-25-05Approved J. C. Deo

Disapproved

Other (Specify)

Time 5:00pm Inmate's Signature Dennis D. Deo

Appeal - Date (attach copy)

Approved

Denied

Other (Specify)



# LEE COUNTY SHERIFF'S DEPARTMENT SPECIAL REPORT

Subject Assault on I/m Templeton Opelika, AL 14 July 05

To the Sheriff of Lee County:

I report the following I/m Edwin Dennis assaulted I/m Cecil  
Templeton during sick call which occurred at 12:45 o'clock  
this PM at LCSO Detention Center

Below give full-particulars, together with name of principals and witness and their address

On the date and around about the time above  
officers Eddie Frazier, Chris Pantelie, Monisha  
Crittenden, David Sellers, Paul Rogers, Craig Murray  
and Matt Phillips, were escorting inmates on  
being to see the nurse for sick call. During  
transportation inmate Edwin Lee Dennis # OC#  
12908 began to punch inmate Cecil Randall  
Templeton OC# 29678 in the face. I/m Dennis  
punched I/m Templeton around about three or  
four times before they were separated by A/c  
Crittenden and A/c Frazier. A/c Crittenden hand-  
cuffed I/m Dennis to separate the two inmates

Reported by A/c Eddie Frazier

Address \_\_\_\_\_ Phone \_\_\_\_\_

Complaint received by \_\_\_\_\_ How \_\_\_\_\_

Assigned to \_\_\_\_\_

LEE COUNTY SHERIFF'S DEPARTMENT  
SPECIAL REPORT

Subject \_\_\_\_\_ Opelika, AL \_\_\_\_\_

To the Sheriff of Lee County:

I report the following \_\_\_\_\_

\_\_\_\_\_ which occurred at \_\_\_\_\_ o'clock

this \_\_\_\_\_ M. at \_\_\_\_\_

Below give full-particulars, together with name of principals and witness and their address

A/c Frazier hand cuffed inmate Templeton and  
informed Sergeant Parquette advised A/c Attender  
to escort Mr. Dennis to Cell E-6 for a cool  
down period and to await disciplinary actions.  
Sgt Parquette also advised A/c Frazier to con-  
tinue said call so Mr. Templeton could be  
examined by nurse Bush, no injuries were  
found. Mr. Templeton was escorted back to his  
cell after said call, and Mr. Dennis remains  
in Cell E-6 awaiting disciplinary.

Respectfully Submitted

A/c Eddie Frazier

Reported by \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

Complaint received by \_\_\_\_\_ How \_\_\_\_\_

Assigned to \_\_\_\_\_

LE COUNTY SHERIFF'S DEPARTMENT  
NOTIFICATION OF CHARGES  
(Form #29)

TO: Edwin Dennis

DATE: 7/23/05

YOU ARE HEREBY NOTIFIED THAT IT IS ALLEGED THAT YOU HAVE COMMITTED THE FOLLOWING RULE VIOLATIONS:

13.2C-2 Assaulting another inmate

YOU HAVE BEEN CHARGED WITH THESE RULE VIOLATIONS BY OFFICER(S):

Off. Frazier

THE FACTS ON WHICH THESE CHARGES ARE BASED ARE:

Officers witness you assault inmate  
Cecil Templeton during sick call

THE MAXIMUM PENALTY FOR THE VIOLATION(S) IS:

21 days lockdown, loss of state, visitation and other  
privileges except attorney or clergy

YOU HAVE THE OPTION OF REQUESTING A DISCIPLINARY HEARING FOR THE ABOVE CHARGE(S) OR ACCEPTING DISCIPLINARY ACTION WITHOUT A HEARING. SHOULD YOU DESIRE A DISCIPLINARY HEARING, YOU MUST REQUEST THE HEARING IN WRITING ON THE INMATE REQUEST FORM ATTACHED TO THIS NOTIFICATION WITHIN EIGHT (8) HOURS AFTER RECEIVING THIS NOTIFICATION.

7-23-05 17:00  
DATE & TIME OF NOTIFICATION

Off. Frazier  
OFFICER MAKING REPORT

**LEE COUNTY SHERIFF'S DEPARTMENT  
SYNOPSIS OF MAJOR/MINOR DISCIPLINARY HEARING**

(Form #30)

ALL THOSE INVOLVED IN THE CASE WERE SWORN IN BY THE CHAIRPERSON.

The Lee County Jail Disciplinary Board convened at 5:00p on 7-24-05, to hear the evidence in the case involving Inmate EDWIN DENNIS, # 12908.  
The board consisted of Chairperson Sgt. TABB and Member OFFICER SCROGGES  
Sgt. PARAVETTE.

The accused and Arresting Officer FRAZIER were brought before the board.

The chairperson explained to DENNIS that he was charged with violating Rule # C-2 of Inmate Handbook (revised August 1988).

DENNIS was further advised that on 7-23-05 at 5:00pm he was served with "Notice of Disciplinary Hearing" and given a copy of the notice. The chairperson explained that according to due process requirements, he must be given at least 24 hours notice of the date that the hearing will take place. Furthermore, that the hearing must be given within seven (7) calendar days of the time his custody changed and that he is to be given the opportunity to request any witnesses on his behalf. The chairperson asked DENNIS if he understood due process and he replied, "YES".

The chairperson explained to DENNIS that he was charged with violation of Rule # C-2, ASSAULT. The chairperson asked DENNIS if he understood the charges against him and he replied, "YES".

DENNIS was then asked how he pled to the charge and he stated, "GUILTY".

**Exhibit F**  
**Special Report dated July 24, 2005**

LEE COUNTY SHERIFF'S DEPARTMENT AT  
SPECIAL REPORT

Subject "J-3's Fighting" Opelika, AL 7/24/05

To the Sheriff of Lee County:

I report the following "J-3's Edwin Dennis occ# 12908 and J-3 Teddy Houston occ# 16736 Fighting in E5" which occurred at 04:40 o'clock  
this A M. at "Lee County Detention Center"

Below give full-particulars, together with name of principals and witness and their address

At or around the above date and time Officer Leon Aaron 43031 was picking up trays in cell block E-5 on E wing. At this time J-3 Houston was making remarks about a problem that allegedly he was causing in the cell. J-3 Houston was making these remarks to no one in particular just stating them aloud. At this time J-3 Dennis appeared to have been offended by these remarks and approached J-3 Houston and began to swing on J-3 Houston. J-3 Houston fought back and was ordered by OFC Aaron to stop fighting. OFC Aaron notified the Central Control officer that there was a 10-10 in E5. Both J-3's stopped fighting voluntarily and separated. Sgt. Tommy Threest 43D17, OFC Ken Liberat 43D23, OFC James Scroggins 43D20, OFC Sheila Wheeler 43D30, and OFC John Brown 42D33 all responded to the call to E5. J-3's Houston and Dennis were already finished with the altercation at this point. J-3 Dennis was removed from E5 and placed in E6 pending disciplinary procedures without incident. J-3 Houston was given a ice pack for his hand until he could see the nurse. "End of Report"

Respectively Submitted  
Leon C. Aaron  
Officer 43D31  
Corrections Division

Reported by \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

Complaint received by \_\_\_\_\_ How \_\_\_\_\_

Assigned to \_\_\_\_\_

**Exhibit G**  
**Inmate File, Reports dated October 14, 2005**

LEE COUNTY DETENTION CENTER  
DISCIPLINARY REPORT

(Form #28)

Inmate Dennis Edwin Dee II Custody Medium Number \_\_\_\_\_  
Last First Middle  
 Assignment L.C.D.C. CELL F-4 is being charged by Ofc. Libersat (43)  
 With rule violation 13.2.C.13 (Having Contraband).  
 on or about 14 October 2005, Time 10:50 a.m. Location Cell F-4  
 Circumstances are as follows: Officer Libersat observed Inmate Dennis giving  
Inmate Krobetzky a tattoo. Inmate Dennis surrendered the  
Contraband to Officer Libersat.

MAJOR \_\_\_\_\_

MINOR \_\_\_\_\_

SERIOUS XNotifying Officer: Sgt. J. P. Smith - 19 Oct 05

Inmate's Signature \_\_\_\_\_

Signature of Arresting Officer [Signature] 43123Time & Date notified: 19 OCT 05 / 1930 P.Witnesses desired: NO X If YES, (List) \_\_\_\_\_

Circumstances Investigated By: \_\_\_\_\_

Hearing date \_\_\_\_\_ Time \_\_\_\_\_ Plea X Guilty ( ) NoIf guilty, inmate must affix signature [Signature] Dennis

Committee Findings &amp; Reasons: \_\_\_\_\_

Committee Recommendations: \_\_\_\_\_

Witnesses: \_\_\_\_\_

Signature of Chairman \_\_\_\_\_

Signature, Member \_\_\_\_\_

Signature, Member \_\_\_\_\_

Copy delivered to inmate: Date \_\_\_\_\_ Time \_\_\_\_\_ Inmate's Signature \_\_\_\_\_

Action - Date \_\_\_\_\_ Appeal - Date (attach copy) \_\_\_\_\_

Approved \_\_\_\_\_ Approved \_\_\_\_\_

Disapproved \_\_\_\_\_ Denied \_\_\_\_\_

Other (Specify) \_\_\_\_\_ Other (Specify) \_\_\_\_\_



COUNTY SHERIFF'S DEPARTMENT  
NOTIFICATION OF CHARGES

(Form #29)

12908

Inmate Dee Dennis II

DATE: 14 October 2005

YOU ARE HEREBY NOTIFIED THAT IT IS ALLEGED THAT YOU HAVE COMMITTED THE  
FOLLOWING RULE VIOLATIONS:

13.2.C.13 Having Contraband.

YOU HAVE BEEN CHARGED WITH THESE RULE VIOLATIONS BY OFFICER(S):  
Officer Libersat (43D23).

THE FACTS ON WHICH THESE CHARGES ARE BASED ARE:

Officer Libersat observed Inmate Dennis Giving Inmate  
Krobetzky a tattoo with a tattoo pen and a toothpaste  
Cap full of tattoo Ink.

THE MAXIMUM PENALTY FOR THE VIOLATION(S) IS:

21 days Disciplinary Lockdown and Loss of all privileges.

OCA# 12908

To the Sheriff of Lee County:

\_\_\_\_\_ which occurred at 10:50 o'clock.

this P M. at L.C.D.C. Side A. of Cell F-4.

On or about the above date and time, while patrolling E-wing, Ofc. Libersat observed Inmate Dennis giving Inmate Krobetzky a tattoo in Cell F-4. Ofc. Libersat signaled for Inmate Dennis to bring the tattoo pen and ink to the door, then called Central Control to have the steel door opened. Inmate Dennis surrendered the tattoo pen and toothpaste cap of ink without incident. Cpl Cobb was notified and a disciplinary report and notification of charges were filed. -end-

Respectively Submitted  
Kenneth D. Libersat  
OFFICER = 43023

Assigned to \_\_\_\_\_

**Exhibit H**  
**Inmate File, Request Slips dated**  
**November 17-18, 2005**

# Lee County Detention Center **IMMEDIATE REQUEST SLIP**

F-4  
**LOCATION**

Name EDWIN DENNIS Date NOV 17th

☐ Telephone Call
 ☐ Doctor
 ☐ Dentist
 ☐ Time Sheet  
☐ Special Visit
 ☐ Personal Problem
 ☒ Other

Briefly Outline Your Request. Give To Jailer

I need to be moved out of  
 this cell before I hurt someone.  
 I'm trying to do this the right  
 way but I'm going to do it the  
 way I really want to if I can't  
 get any help from the staff.

Do Not Write Below This Line - For Reply Only

In EDWIN DENNIS move out of F-4  
 to avoid a problem in F-4 cell.  
 MR EASON ADVISED He need to be move.  
 In EDWIN DENNIS move to E-6 cpl lyles

Approved \_\_\_\_\_ Denied \_\_\_\_\_ Collect Call \_\_\_\_\_

All Request Will Be Routed Through The Sergeant Over The Jail, Then Forwarded To Those The Request is Directed.

☐ Lieutenant
 ☐ Chief Deputy
 ☐ Sheriff

Date \_\_\_\_\_ Time Received \_\_\_\_\_

CORRECTION OFFICER \_\_\_\_\_

Lee County Detention Center  
**INMATE REQUEST SLIP**

Name CALVIN DENNIS Date NOV 18<sup>th</sup> <sup>F-4</sup>  
**LOCATION**

☐ Telephone Call ☐ Doctor ☐ Dentist ☐ Time Sheet  
☐ Special Visit ☐ Personal Problem ☐ Other

Briefly Outline Your Request. Give To Jailer

I need to see Eason and be  
moved out of this cell before  
I stab a motherfucker in the  
throat with a pen!

Do Not Write Below This Line - For Reply Only

Addressed 11/18/5

J3 was reassigned to E-6 in order to  
ensure the safety of the facility  
will reassess J3's mental status later  
time. *Gerson*

Approved \_\_\_\_\_ Denied \_\_\_\_\_ Collect Call \_\_\_\_\_

All Request Will Be Routed Through The Sergeant Over The Jail, Then Forwarded To  
Those The Request is Directed.

☐ Lieutenant ☐ Chief Deputy ☐ Sheriff

Date \_\_\_\_\_ Time Received \_\_\_\_\_

CORRECTION OFFICER \_\_\_\_\_

**Exhibit I**  
**Inmate Medical File of Edwin D. Dennis, Jr.,**  
**Notes dated July 24, 2005**

NOTES

SS# 255-61-2351

NAME Derrin, Edwin DOB 11/17/72 AGE 32 SEX m RACE w

DRUG ALLERGIES NKA TETANUS \_\_\_\_\_

NATURE OF PROBLEM OR REQUEST alteration

I CONSENT TO BE TREATED BY HEALTH STAFF FOR THE CONDITION DESCRIBED.

SIGNATURE \_\_\_\_\_

\*\*\*\*\*

HEALTH CARE DOCUMENTATION

SUBJECTIVE:

OBJECTIVE: BP \_\_\_\_\_ P \_\_\_\_\_ R \_\_\_\_\_ T \_\_\_\_\_

ASSESSMENT: cb pain to teeth p alteration & is unable  
to chew, assessment of teeth showed & edema, 15/15 of  
trauma to mouth or teeth, NADN

PLAN: see mb

REFER TO: X PA/PHYSICIAN \_\_\_\_\_ MENTAL HEALTH \_\_\_\_\_ DENTAL \_\_\_\_\_

SIGNATURE D. Bu TITLE eph DATE 07/24/06 TIME \_\_\_\_\_

**Exhibit J**  
**Medical File, Notes dated July 27, 2005**



## NOTES

SS# 255-61-2351NAME Dennis, Edwin DOB 11/27/72 AGE 32 SEX M RACE WDRUG ALLERGIES NKA TETANUS \_\_\_\_\_NATURE OF PROBLEM OR REQUEST altercation

I CONSENT TO BE TREATED BY HEALTH STAFF FOR THE CONDITION DESCRIBED.

SIGNATURE \_\_\_\_\_

## HEALTH CARE DOCUMENTATION

SUBJECTIVE:

OBJECTIVE: BP \_\_\_\_\_ P \_\_\_\_\_ R \_\_\_\_\_ T \_\_\_\_\_

ASSESSMENT:

07/27/05 Lee County Detention Center Edwin Dennis #255612351

This 32 YOWM was hit in the right side of his jaw on Wednesday three days ago. He couldn't swallow his spit at first, he can swallow his spit now but he can't chew his food.

**Physical Exam:** Alert, no distress. HEENT: It is hard for him to open his mouth, he is able to do it, it is just not comfortable. When I palpate the mandible with a gloved finger, it is quite tender back by the second and third molars. There is no obvious bony step-off but he is tender in the same place in both the lingual and buccal side. He says his back tooth feels loose. TM's and ear canals are clear. Throat clear. NECK: Supple comfortable neck movement. CHEST: Normal respirations.

**Impression:** Contusion to the jaw; possible fracture of the mandible.

**Plan:** Panorex x-ray of the mandible. Naprosyn 500 mg b.i.d. #20.

PLAN:

*panorex or regular x-ray of mandible.  
call if needed.  
Naprosyn 500 300 #20*

REFER TO: \_\_\_\_\_ PA/PHYSICIAN \_\_\_\_\_ MENTAL HEALTH \_\_\_\_\_ DENTAL \_\_\_\_\_

SIGNATURE \_\_\_\_\_ TITLE \_\_\_\_\_ DATE 7-27-05 TIME 1057

JOHN H. McANLAND MD  
AM8104894  
AL11404

*(Ø 7p  
I/D  
info)*

**Exhibit K**  
**X-ray records dated July 27, 2005**

ALABAMA / MISSISSIPPI  
1-800-845-8183**SOUTHERN RADIOLOGY  
SERVICES, LLC**

Please indicate Patient Status:

☐ Medicare Part A Patient (Skilled)  
☐ 3rd Party (Non-Skilled)  
☐ VA Patient  
☐ Employee

PLEASE PRINT

PATIENT: <u>Dennis, Edwin</u>		RESPONSIBLE PARTY INFORMATION (MUST BE COMPLETED FOR ALL PATIENTS)	
DOB: <u>11/27/74</u>	SEX: <u>M</u> F	ROOM #:	NAME:
FACILITY: <u>Lee County Sheriff</u>	CODE	ADDRESS: <u>LEE COUNTY SHERIFF</u>	PHONE #: ( )
PHONE: <u>2311 GATEWAY DRIVE</u>	FAX: <u>255-61-2351</u>	CITY: <u>OPELIKA, AL 36803</u>	STATE: ZIP:
SS#: <u>OPELIKA, AL 36803</u>	CODE	PATIENT SIGNATURE: _____	
MEDICARE #:	CODE	Patient's or Authorized Person's Signature. I authorized the release of any medical or other information necessary to process this claim. I request payment of government/insurance benefits be made to the provider performing services.	
MEDICAID #:	CODE	<input type="checkbox"/> Patient Unable to Sign	
INSURANCE:	CODE		
INSURANCE #:	PRE CERTIFICATION #		

EXAMS REQUESTED: Please Mark Each Clearly  
X-RAY EXAMS

74000	Abdomen, 1 View	73520	Hip, Min 2 Views w/Pelvis L R	73590	Tibia/Fibula, 2 Views L R
73600	Ankle, 2 Views (AP 7 LAT) L R	73510	Hip, Comp Min 2 Views L R	73100	Wrist, 2 Views L R
73610	Ankle, Comp Min 3 Views L R	73060	Humerus, Min 2 Views L R	73110	Wrist, Min 3 Views L R
73650	Calcaneus (Heel), 2 Views L R	73560	Knee, 2 Views L R	<input checked="" type="checkbox"/>	OTHER
71010	Chest, 1 View (AP)	73562	Knee, 3 Views (inc OBLQ) L R		OTHER EXAMS L R
		70160	Nasal Bones, Comp Min 3 Views		<u>Mandible</u>
71111	Chest With Ribs, 4 Views	72170	Pelvis, 1 Views		
73000	Clavicle, Complete L R	71100	Ribs, 2 Views L R	93000	EKG Pacemaker: Y N
73070	Elbow, 2 Views L R	72220	Sacrum/Coccyx, Min 2 Views	95819	EEG
73080	Elbow, Comp 3 Views L R	73030	Shoulder, Min 2 Views L R		
73550	Femur, 2 Views L R	70210	Sinuses, Less Than 3 Views		
73620	Foot, 2 Views L R				
73630	Foot, Comp Min 3 Views L R	70250	Skull, Less Than 4 Views		
73090	Forearm, 2 Views L R	72040	Spine, Cervical 2 Views		
73120	Hand, 2 Views L R	72100	Spine, Lumbosacral 2 Views		
73130	Hand, Min 3 Views L R	72070	Spine, Thoracic 2 Views		

DIAGNOSIS/SYMPOM(S): Please Mark ALL that apply

787.3	Abdomen Distention (Flatulence)	496	COPD, Chronic Obstructive Pulm. Dis.	560.9	Obstruction, Intestinal
787.5	Abnormal Bowel Sounds	786.2	Coughing		Pain in
413.0	Angina		Dislocation of	485	Pneumonia, Confirmed
	Arthritis of	780.4	Dizziness	514	Pneumonia, Probable
429.2	ASCVD, Arteriosclerotic cardiovas. Dis.	787.2	Dysphagia (Difficulty Swallowing)	795.5	Positive Mantoux, PPD
427.31	Atrial Fibrillation	782.3	Edema (Swelling)	518.4	Pulmonary Edema, NOS
507.0	Aspiration	492.0	Emphysema	515	Pulmonary Fibrosis
427.89	Bradycardia	780.6	Febrile (Feverish)	786.7	Rales in Chest
	Bruise of	<input checked="" type="checkbox"/>	Possible Fracture of <u>mandible</u>	786.09	Shortness of Breath
466.0	Bronchitis, NOS	560.39	Impaction	780.2	Syncope & Collapse
	Carcinoma of	518.3	Infiltrate, Lung	785.0	Tachycardia
429.3	Cardiomegaly	410.92	Myocardial Infarction	011.90	Tuberculosis
786.50	Chest Pain, Unspecified	787.01	Nausea and Vomiting	519.8	URI (Chronic)
514	Congestion, Chest				OTHER
428.0	Congestive Heart Failure				

PHYSICIAN'S  
SIGNATURE:

Because of physical psychological and/or age limitations, this patient would find it difficult to receive this/these procedure(s) at a fixed site. I certify that this/these procedure(s) is/are medically necessary for the proper treatment of this patient.

NURSE'S  
SIGNATURE:ORDERING  
PHYSICIAN:

PHONE #:

FAX:

CODE

X-RAY #

TECH: K.S.PDATE: 7-27-05#VIEWS: 4ARRIVE TIME: 1:00Q0092 # 1

DEPART TIME:

# PTS SEEN 1/3

RADIOLOGIST:

PRELIMINARY REPORT:

AM

7/28/2005 8:40 AM 1: Fax Southern Radiology S TO: 1-334-737-5000 PAGE: 001 OF 001

**SOUTHERN RADIOLOGY SERVICES, LLC  
X-RAY REPORT**

<b>DATE</b>	<b>LAST NAME</b>	<b>FIRST NAME</b>	<b>MI</b>
7/27/2005	DENNIS	EDWIN	
<b>D.O.B.</b>	<b>SEX</b>	<b>FACILITY</b>	
11/27/1972	M	LEE COUNTY JAIL	
<b>ORDERING PHYSICIAN</b>		<b>X-RAY NO.</b>	
DR. MCFARLAND		MT8670	

**FOUR VIEWS OF THE MANDIBLE, 07/27/05**

**FINDINGS:** No evidence of fracture is identified on limited views. The paranasal sinuses appear unremarkable.

**IMPRESSION:** No gross mandibular fracture is seen on limited views.

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William Abbott, M.D./pag

tt: 7/28/2005 8:39:04 AM  
td: 7/27/2005 5:51:18 PM

**Exhibit L**  
**Inmate File, Request Slip dated July 28, 2005**

ee County Detention Center  
**INMATE REQUEST SLIP**

E-6  
**LOCATION**

Name EDWIN DENNIS Date July 29th

☐ Telephone Call ☒ Doctor ☐ Dentist ☐ Time Sheet  
☐ Special Visit ☐ Personal Problem ☐ Other

Briefly Outline Your Request. Give To Jailer

I need to see the nurse to see  
what is going to be done about  
tooth. It is killing me. Also I would  
like to know the results of the x-rays  
that were taking yesterday. Thank you

Do Not Write Below This Line - For Reply Only

you will be added to the dental  
list for your tooth. your xray  
showed nothing wrong. Everything  
normal. 07/29/05 D. Bullock

Approved \_\_\_\_\_ Denied \_\_\_\_\_ Collect Call \_\_\_\_\_

All Request Will Be Routed Through The Sergeant Over The Jail, Then Forwarded To  
 Those The Request is Directed.

☐ Lieutenant ☐ Chief Deputy ☐ Sheriff

Date \_\_\_\_\_ Time Received \_\_\_\_\_

CORRECTION OFFICER \_\_\_\_\_

**Exhibit M**  
**Inmate File, Record of Medical Examination**  
**dated August 12, 2005**

# LEE COUNTY SHERIFF'S DEPARTMENT

## RECORD OF MEDICAL EXAMINATION

(Form #11)

**PART 1:**

To be completed by jailer. (Please print clearly).

1. Inmate's name: Dennis, Edwin
2. Date: 08/12/05
3. Time: 0800
4. Reason treatment was needed: dental appt
5. Did inmate request treatment? yes (If yes, place request form in inmate's file if in writing.)
6. Was inmate transported from the jail? yes
7. If yes, to what location? Dr. Bellas
8. Was inmate treated at the jail? yes
9. Who examined the inmate? nursing staff
10. Jailer's name: \_\_\_\_\_ Signature: \_\_\_\_\_

**PART 2:**

To be completed by person examining inmate. (Please print clearly.)

1. Type of treatment/examination: #32 SURGICAL EXTRACTION
2. Prognosis: Good
3. Is additional treatment needed? \_\_\_\_\_ If so, please specify if other than by medication: \_\_\_\_\_
4. Medication prescribed: LORTAB-5
5. Special instructions for administration: AS DIRECTED
6. Other special instructions (restrictions of diet, activity, work, etc.; observation orders; other): \_\_\_\_\_

N. E. BOTTA DMD

Health Care Provider (Please print and give title, i.e. M.D., R.N., D.D.S., etc.)

Date

8-11-05

Time

8:20

Signature

N. E. BOTTA